1								T		_	_		L
PATENT APPLICATION FEE DETERMINATION RECORD (Fifective December 8, 2004 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)												45	Ī
. 3 Column 1) (Column 2)							SMAI TYPE		ΥΠΤΥ □	OR		THAN ENTITY	
TOTAL CLAIMS			·					ΤE	350	1	RATE	1942	P
FOR			NUMBER FILED		NUM	NUMBER EXTRA		FEE	150.00	OR	BASIC FEE	300.00	
TOTAL CHARGEABLE CLAIMS			minus 20=				XS:	 S=		OR	X\$50=	•	
INDEPENDENT CLAIMS			1	inus 3 =	. //		X10			1			
		NDENT CLAIM P						_	1	OR	 		ı
<u> </u>		 _				+18	0≖	.//	OR	+360=		Į	
• H	* If the difference in column 1 is less than zero, enter "0" in column 2								• • •	OR			ł
C	5-06°	LAIMŞ AS A	MENDED - PART II (Column 2) (Column 3)			SMA	<u>u</u> l	ENTITY).	OR	OTHER SMALL		l	
AMENDMENTA		CLAIMS REMAINING AFTER		HIGH NUME PREVIO	EST BER XUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL PEE		RATE	ADDI- TIONAL FEE	
	Total	AMENDMENT	Minus	- 2	<u>0.</u>	-0	X\$ 25	5 =	X	OR	X\$50=		
E Z	Independent	. /	Minus ·	•••	-	- 0	X10	$ \sqrt{}$		OR	X200=		
₹.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/		Ç.			
	•		+180		_/:	OR	+360=	3.46					
·	•						ADDIT.	TAL FEE	<u>ر رب</u>	OR	ADOIT. FEE		
		(Column 1)		(Colun		(Column 3)	ــــــــــــــــــــــــــــــــــــــ						
AMENDMENT 8		CLAIMS REMAINING · AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER HUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	* .	, _	8	X\$ 2	5=		OR	X\$50=	. ~.	
	Independent	•	Minus	•••		•	X100			OR	X200=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 100		_		+360=		ı
	•		•				+180	W		OR	TOTAL		ı
					٠.		ADDIT.			OR.	ADDIT, FEE		l
_		(Column 1)		(Colum		(Column 3)				٠.			ı
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ier USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
	Total	•	Minus	jan .	•		X\$ 25	ja		OR.	X\$50=		
	Independent	•	Minus			•	X100	.†	· · ·	OR	X200=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM							-		~			
+160= OR +360=													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 1. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE													
-	f the Winhest his	mber Previously Pa iber Previously Pai	id for IN TH	IS SPACE I	i less Tie	n 3. erier "3."	•	_	rupriete box			•	
-	the safety of	nd Lidentific La		·									Į